

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH

State File No. 1120

Registered No. 143

1. PLACE OF BIRTH

County Gila

State Arizona

District or Township

or Village

City Miami

No.

St.

Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

If child is not yet named, make supplemental report, as directed.

2. Full name of child Chirra Munoz

3. Sex of Child
Female

To be answered ONLY
in event of plural
births.

4. Twin, triplet or other

6. Legitimate? yes

7. Date

of birth

Feb. 7 - 1925
Month Day Year

5. No., in order of birth

8.

FATHER

Full name

Daniel Munoz

9. Residence

(Usual place of abode)

Miami

If non-resident, give place and state

Arizona

10. Color or race

Mex.

11. Age at last birthday 24 (Years)

12. Birthplace (city or place)

Chihuahua
Mex.

(State or country)

13. Occupati-

Nature

Miner

14.

MOTHER

Full maiden name

Concha Roman

15. Residence

(Usual place of abode)

Miami

If non-resident, give place and state

Arizona

16. Color or race

Mex.

17. Age at last birthday 19 (Years)

18. Birthplace (city or place)

Zacatecas
Mex.

(State or country)

19. Occupation

Nature of Industry

Housewife

20. Number

children of this mother

2

(a) Born alive and now living 2

(b) Born alive but now dead 0

(c) Stillborn 0

(Taken as of time of birth of child herein certified and including this child.)

21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was

born alive
(Born alive or stillborn)

at 9:30 P. M. on the date above stated.

Signature

Cyril M. Brown

(Physician or midwife)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from a supplemental report

Address

Miami, Arizona

Month, day, year

549-207-395

Filed

May 12, 31

Registrar

Registrar

MARGIN RESERVED FOR BINDING
WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
I. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.